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July 25, 2005

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Re: Patent Application #10/657,340

Dear Ms. Jones,

I am requesting small entity status for the above-mentioned patent. I am a small business person with limited resources. Please acknowledge receipt of this request by calling (716) 851-4016.

Thank You,

Jesse J Carmichael

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Application Number. REVOCATION OF POWER OF Filing Date ATTORNEY WITH First Named Inventor **NEW POWER OF ATTORNEY** Art Unit AND **Examiner Name** CHANGE OF CORRESPONDENCE ADDRESS Attorney Docket Number hereby revoke all previous powers of attorney given in the above-identified application. A Power of Attorney is submitted herewith. OR I hereby appoint the practitioners associated with the Customer Number: Please change the correspondence address for the above-identified application to: The address associated with **Customer Number:** OR Firm or Individual Name Address City State Country Telephone I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) SIGNATURE of Applicant or Assignee of Record Signature Name Telephone Date NOTE: Signatures of all the inventors or essignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. forms are submitted. This collection of Information is required by 37 CFR 1.38. The priorimation is required to obtain or retain a benefit by the public which is to fite (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and stabmitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Petent and Tredemark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22813-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Paternte, P.O. Box 1450, Alexandria, VA 22813-1450.

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